

## ISSUE FEE AND/OR PUBLICATION FEE TRANSMITTAL

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Samira Uddin	(Depositor's name)
<i>Samira Uddin</i>	(Signature)
2/1/08	(Date)

Application No.	Filing Date	First Named Inventor	Docket No.	Confirmation No.
10/016661	10/29/2001	Remis Balaniuk	S00-226/US	3916

Title: LONG ELEMENTS METHOD FOR SIMULATION OF DEFORMABLE OBJECTS

Appl. Type	Small Entity	Issue Fee Due	Pub. Fee Due	Prev. Paid IF	Total Fee Due	Date Due
nonprovisional	YES	\$720	\$300	\$0	\$1020	04/15/2008
Examiner		Art Unit		Class-SubClass		
GEBRESILASSIE, KIBROM K		2128		703/002		

- |   |   |
|---|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363):<br><input type="checkbox"/> Change of correspondence address attached.<br><input type="checkbox"/> "Fee address" indication attached.  | 2. For printing on the patent front page list firm name:<br><br>LUMEN PATENT FIRM, INC. |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT.<br>Unless an assignee is identified below, no assignee will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. |   |
| (A) NAME OF ASSIGNEE<br>1. The Board of Trustees of the Leland Stanford Junior University   |   |
| (B) RESIDENCE (City and State or Country)<br>1. Palo Alto, CA   |   |

Please check the appropriate assignee category/categories:  Individual  Corporation or Private Group Entity  Government

- |  |   |
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| 4a. The following fee(s) are submitted:  | 4b. Payment of fee(s):  |
| <input checked="" type="checkbox"/> Issue Fee<br><input checked="" type="checkbox"/> Publication Fee<br><input type="checkbox"/> Advance Order - # of Copies _____ | <input type="checkbox"/> Check is enclosed<br><input checked="" type="checkbox"/> Payment by credit card (form is attached)<br><input type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account No. _____ (enclose extra copy) |

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| 5. Change in entity status (from status indicated above)   |
| <input type="checkbox"/> a. Applicant claims SMALL ENTITY status <input type="checkbox"/> b. Applicant is no longer claiming SMALL ENTITY status |

## SIGNATURE OF APPLICANT, REGISTERED ATTORNEY, OR REGISTERED AGENT

SIGNATURE	/ Thomas J. McFarlane / Reg. No. 39,299	DATE	2/1/08
PRINTED NAME	Thomas J. McFarlane	REG. NO.	39,299

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**TRANSMITTAL  
FORM**

*(to be used for all correspondence after initial filing)*

Total Number of Pages in This Submission	Application Number	10/016661
	Filing Date	10/29/2001
	First Named Inventor	Remis Balaniuk
	Art Unit	2128
	Examiner Name	GEBRESILASSIE, KIBROM K

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Doc(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawings <input type="checkbox"/> Licensing-related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Corresp. Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Comm. to TC <input type="checkbox"/> Appeal Comm. to Board of Appeals and Interferences <input type="checkbox"/> Appeal Comm. to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other ( <i>Specified below</i> )
Other: Issue Fee		

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FIRM NAME	LUMEN PATENT FIRM, Inc.		
SIGNATURE	/ Thomas J. McFarlane / Reg.No. 39,299		
PRINTED NAME	Thomas J. McFarlane		
DATE	2/1/08	REGISTRATION NUMBER	39,299

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SIGNATURE	/ Samira Uddin /
PRINTED NAME	Samira Uddin
DATE	2/1/08

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